

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

10780502

FILING DATE

APPLICANT(S)

2/14/05 10-11-03 CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			/		/	
2			/		/	
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TOTAL IND.			3			
TOTAL DEP.			18		16	
TOTAL CLAIMS			19		19	

	IND.		DEP.		IND.		DEP.	
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